## NEBRASKA DEPARTMENT OF ENVIRONMENTAL QUALITY

AGRICULTURE SECTION \* 1200 N STREET, SUITE 400 \* LINCOLN, NE 68509-8922 \* TEL: (402)471-4239 \*FAX: (402) 471-2909 \* WEB SITE: <u>www.ndeg.state.ne.us</u>

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## FORM E TRANSFER REQUEST

(PL	EASE PRINT OR TYPE ALL INFORMA	TION)	
CURRENT OPERATION INFORM	ATION		
Current Name of Operation			
Legal Description			
Date Current Approval or Permit Issue	d		
Name of Current Authorized Represent	tative		Operating, NPDES
Address of Authorized Representative			
	City	State	Zip
As current Authorized Representative,	•		Zip
As current Authorized Representative,  (Signature of Current Authorized Representative)	I approve of this transfe		•
(Signature of Current Authorized Represe	I approve of this transfe	r.	•
(Signature of Current Authorized Represent PROPOSED OPERATION INFORM	I approve of this transfe	r. Date of Signature	e
(Signature of Current Authorized Represent PROPOSED OPERATION INFORM Name of New Operation	I approve of this transfe	r. Date of Signature	e
	I approve of this transfe	Date of Signature	e

**NOTE:** Any proposed changes to the operation that vary from the terms and conditions of an approved permit require submission of a new application.

## **CERTIFICATION**

I certify that under the laws of the State of Nebraska, I have the authority to sign this Transfer Request on behalf of the animal feeding operation for which this form is submitted.

I also certify that I have personally examined and am familiar with the Construction Approval or Permit for this animal feeding operation. I agree to comply with all terms, conditions and requirements of the Construction Approval or Permit, and with the requirements of Title 130, "Livestock Waste Control Regulations." I have attached a completed Applicant Disclosure form (Appendix D).

I agree to notify the Department before making any changes to the operation that vary from the terms and conditions of the Construction Approval or Permit. I acknowledge that the new Construction Approval or Permit may include new terms and conditions.

(Signature of new Authorized Representative)	Date of Signature

**NOTE:** The authorized representative is responsible for compliance with all federal, state, and local laws and zoning regulations applicable to this operation.